## Illinois Stand-Alone Prescription Drug Plan Organizations (PDP Region 17)

\* The beneficiary drug premium covers prescription drugs only and does not cover medical or hospital benefits. Beneficiaries are responsible for their Part B premium and any premiums for Medigap coverage to meet their individual needs.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for some demonstrations, National PACE organizations, Employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Organization Name	Plan Name	Beneficiary Total Drug Plan Premium	Drug Deductible			Includes Tiered Copay-	Type of Additional Coverage Offered in Coverage Gap		Mail	Number of Top 100
			Zero	Reduced	Standard (\$250)	ments for Drugs	Generics Only	Generics and Brands	Order Offered	Drugs on Formulary
Aetna Life Insurance Company	Aetna Medicare Prescription Basic Plan	\$31.31	Zeiu	Reduced	(φ250)	• Drugs	Generics Only	Dianus	onereu	82
Aetha Life insurance Company	Aetna Medicare Prescription Standard Plan	\$41.96	•		-	•	•		•	82
	Aetna Medicare Prescription Premier Plan	\$57.50	<del>.</del>			•	<del>- :</del>		•	95
CIGNA HealthCare  Community Care Rx	Plan 00317	\$34.02		<b>†</b>	•	•	•		•	99
	Plan 00517	\$39.45	•		-	•			-	99
	Plan 00617	\$47.55	<u> </u>	<b>†</b>		•	•		•	99
	CCRX BASIC	\$30.23		1	•	•	•		_	89
Community Care RX	CCRX CHOICE	\$30.23			•	•				89
	CCRX GOLD	\$42.24			•					89
Coventry AdvantraRx	AdvantraRx Value	\$42.24 \$20.56	•	•		•			•	73
HealthSpring	AdvantraRx Value AdvantraRx Premier	\$30.54	<u> </u>	1		•	+		•	97
	AdvantraRx Premier Plus	\$43.19	<u> </u>	+		•			•	97
	HealthSpring Prescription Drug Plan	\$24.78	•	+		•			•	83
HISC	IL PDP Defined Standard	\$24.78		+					•	96
Humana Inc.  PacifiCare Life and Health Insurance Company	IL PDP Basic	\$27.77	•		•				•	96
	IL PDP Enhanced	\$45.35	<u> </u>			-:			•	96
	Humana PDP Standard S5884-075	\$13.32			•	•			•	97
	Humana PDP Standard S3664-075 Humana PDP Enhanced S5884-015	\$20.08	•		•	•			•	97
	Humana PDP Complete S5884-045	\$61.51	•			•		•	•	97
	PacifiCare Saver Plan	\$26.99				-:		•	•	77
	PacifiCare Saver Plan	\$41.72	•			•			•	86
	PacifiCare Complete Plan	\$45.90	<u> </u>			-:			•	77
Prescription Pathway  SilverScript	Pennsylvania Life Standard Defined Reg 17	\$27.19				•	•		•	88
	American Progressive Act Equ Std Reg 17	\$36.55			•	•			•	88
	Pennsylvania Life Act. Equ. Standard Reg17	\$36.58			•	•			•	88
	American Progressive Enhanced #1 Reg 17	\$48.37	•		-	•			•	88
	Pennsylvania Life Enhanced #1 Reg 17	\$48.38	<del>.</del>		-	•			•	88
	American Progressive Enhanced #2 Reg 17	\$65.04	<del>.</del>		-	•			•	96
		\$26.58	<u> </u>			•			•	89
SilverScript	SilverScript SilverScript Plus	\$54.09		•	-	•			•	94
Sterling Prescription Drug Plan	Sterling Prescription Drug Plan	\$53.59		•	-	•			•	94
Unicare	Medicare RX Rewards	\$21.53		•						
	Medicare RX Rewards  Medicare RX Rewards Plus	\$21.53 \$29.20		-	•	•			•	88 88
			•	-		•			•	
Haitad Amarican Incurance Company	Medicare RX Rewards Premier	\$38.93	•	<del>                                     </del>		•	•		•	96
United American Insurance Company United HealthCare Insurance Company	United American Medicare Drug Plan	\$34.02	•	<del>                                     </del>		•	-		•	93
	EverChoice Rx	\$23.17		•		•	-		•	96
	AARP Medicare Rx by UnitedHealthcare	\$25.78	•	<del>                                     </del>		•	-		•	96
WallOana	United Medicare Rx - B	\$28.61	•	<b>!</b>		•			•	96
WellCare	WellCare Signature	\$21.31	•	<b>!</b>		•			•	86
	WellCare Complete	\$40.97	•			•	1		•	83
	WellCare Premier	\$43.75	•	<b>!</b>		•			•	82
YOURx PLAN	Medco Prescription Savings Plan	\$31.12			•	•			•	93